

Methods of Birth Control (Contraception)



June 2005

Why is Birth Control so Important?

- Planned pregnancies are healthier
- Lower risks for
 - Mom (dropout, welfare, single parenthood)
 - Baby (low birth weight, death, child abuse, foster care, incarceration, teen parenthood)
 - Dad (less education, lower income)
- Many teen parents do a wonderful job, but...

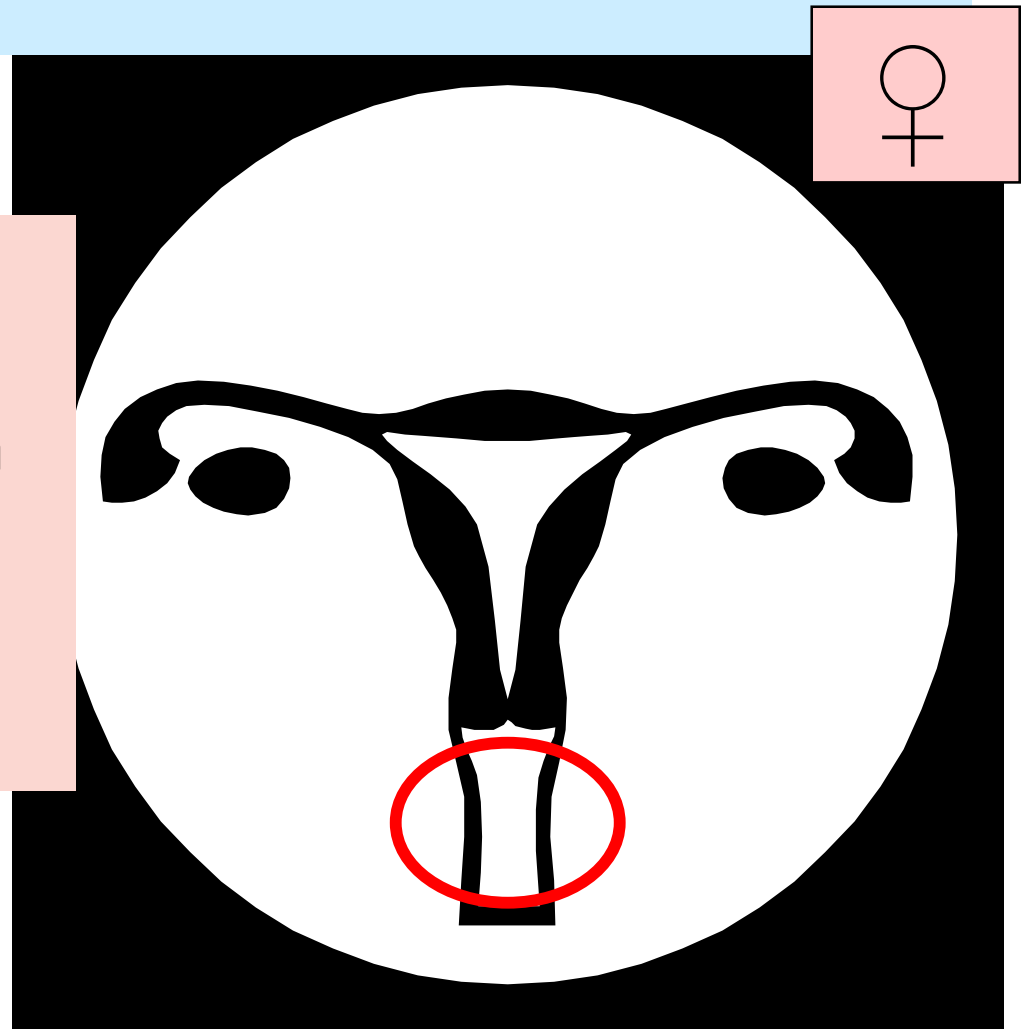
➔ It is healthier for mom, baby, & the whole family to wait.



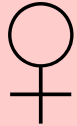
Most teen pregnancies are not planned

How Pregnancy Can Be Prevented

1. Abstinence
- 2. Barriers**
 - a. Female Condom
 - b. Diaphragm/Cap
 - c. Sponge
- 3. Spermicides**



Other Ways to Prevent Pregnancy

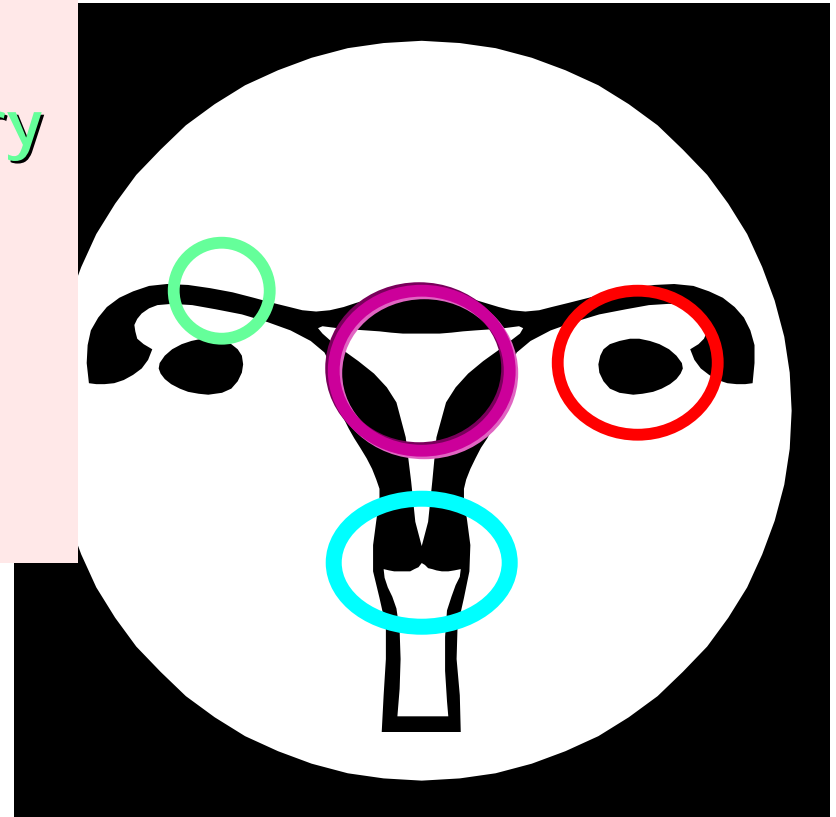


4. Hormones

- a. Prevent ovulation
- b. Fallopian tube chemistry
- c. Thin uterus lining
- d. Thick cervical mucus

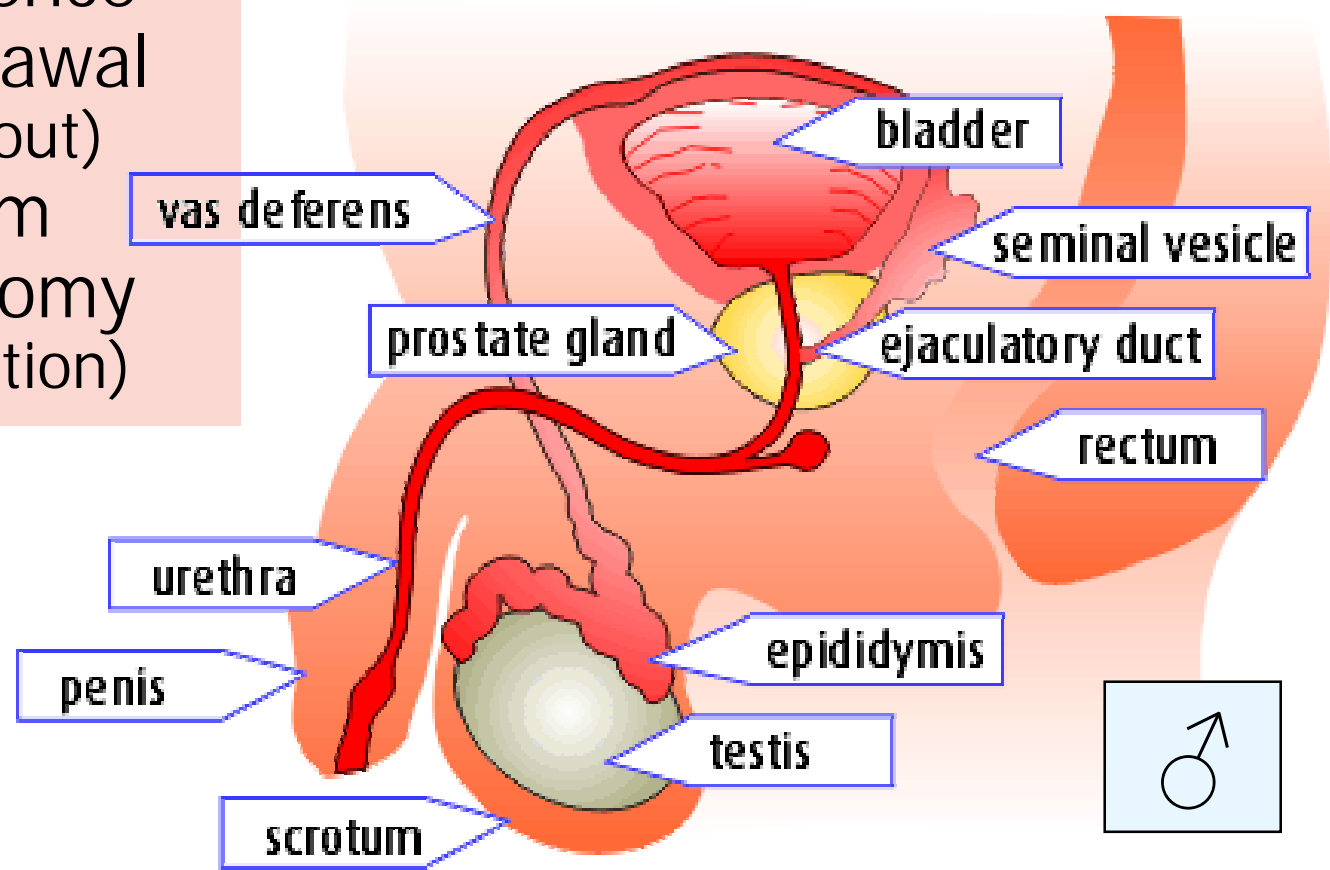
5. Intrauterine Device

6. Tubal sterilization



How Pregnancy Can Be Prevented

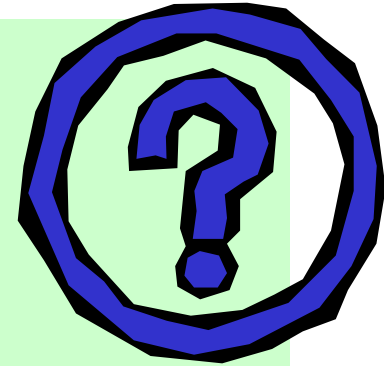
1. Abstinence
2. Withdrawal
(pull out)
3. Condom
4. Vasectomy
(sterilization)



What Are the Methods of Birth Control (Contraception)?

- Abstinence
- Hormones
 - Pill
 - Patch
 - Ring
 - Shot ("Depo")
 - Implants
- IUDs

- Barriers
 - Condoms
 - Caps
 - Sponge
- Spermicides
- Periodic Abstinence
 - Rhythm, Natural Family Planning, Cycle Beads
- Sterilization



•Emergency Contraception

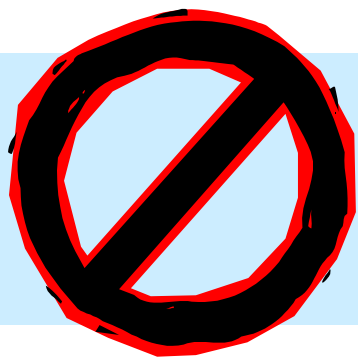
Contraceptive Failure Rates

% Couples with Pregnancy in the 1st Year of TYPICAL Use



NONE (Chance)	85
Spermicides	29
Withdrawal	27
Periodic Abstinence	25
Female Condom	21
Diaphragm	16
Condom	15
Pill/Patch/Ring	8
Depo-Provera®	3
IUD (ParaGard® /Mirena®)	0.8 / 0.1
Sterilization (Fem/Male)	0.5 / 0.15
Implant	0.05
Abstinence	???

Adapted from:
Trussell J. Contraceptive failure in the United States. Contraception 2004;70:89-96.



Abstinence (Not Having Sex)

- Healthiest choice for young teens
- Avoids risk of STDs as well as pregnancy
- To avoid STD risk, must avoid oral and anal sex, as well as vaginal sex

Effective use of Abstinence means:

- Making a Decision
 - Making a Plan
- Being Prepared

Oral Contraceptives

"The Pill"

"Combined": Estrogen & Progestin



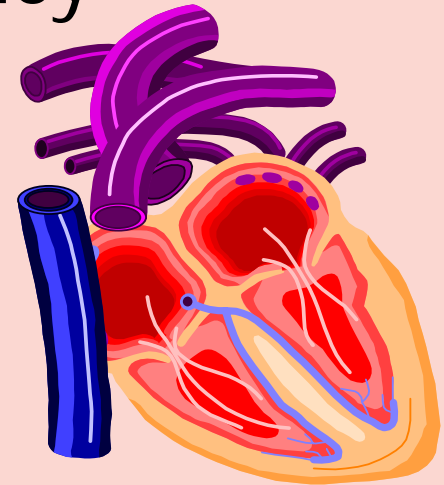
- Risks:
 - No protection from STDs
 - Rare serious cardiovascular events

- Benefits:
 - Very effective: prevents ovulation
 - "Non-contraceptive" benefits
 - Unrelated to when a person has sex

Does not cause cancer

Serious Risks of Birth Control Pills:

- Risks are lower than pregnancy
- Rare cardiovascular events
 - Blood clots
 - Stroke
 - Heart attack
- Women who have had these should not take combined pills



Common “Minor” Side Effects of Combined Pills

- Nausea
- Breast tenderness
- Fatigue
- Headaches

- Spotting or bleeding—very common
- Skipped periods



Non-contraceptive Benefits of Combined Pills

Reductions in....



- Endometrial cancer
- Ovarian cancer
- Ectopic pregnancy
- PID
- Ovarian cysts
- Irregular bleeding
- Anemia
- Dysmenorrhea
- Fibrocystic breasts
- PMS
- Fibroids
- Osteoporosis

Progestin-only “Mini-pills”



- No estrogen:
 - Some women who can't take combined pills can take these
 - Sometimes prevents ovulation
 - Cervical mucus, tube, uterus lining
- Irregular bleeding
- Often used when breastfeeding
- Can't miss ANY!

Combined PATCH (Ortho-Evra®)

Similar to “Combined” Pills



- Estrogen + Progestin:
 - Prevents ovulation
- Cycle: 3 patches x 7 days each
 - 1 patch-free week
- Apply to:
 - Buttocks, lower abdomen, outer arm, upper back
- Higher failure rate for women weighing over 198 lb

Patch Side Effects

- Breakthrough bleeding more frequent than with pills
- Breast tenderness more common
- Itching or rash at the site is common
- Few fall off: check once a day



Combined Vaginal Ring: NuvaRing[®]

Similar to “Combined” Pills



- Flexible, transparent
- Releases daily
 - Estrogen & Progestin
- In for 3 weeks; Out for 1
- Side effects: similar to pill
 - Vaginal infection/irritation
 - Headache/nausea

The SHOT: Depo-Provera®: “Depo”

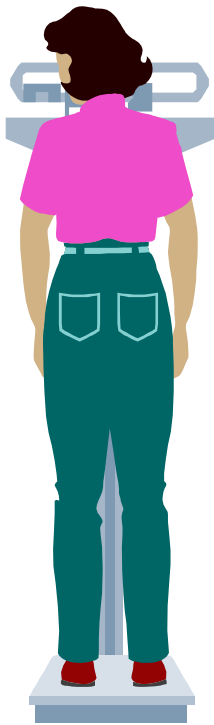


- Long-acting progestin
- Bigger dose than “mini-pills”
- No estrogen:
 - Less risk than pills
- Prevents ovulation
- Also thickens cervical mucus

More effective than Pills



Depo: Possible Side Effects

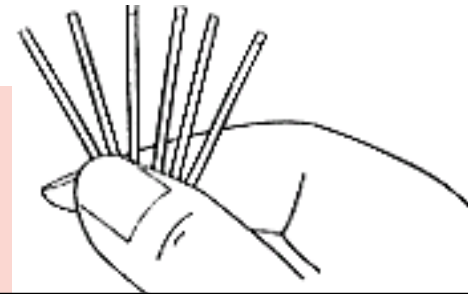


- Irregular bleeding, or no bleeding
- Weight gain is common
- It might take months to get pregnant afterwards
- Decrease in bone calcium
 - Limit to 2 years, if possible

• No protection from STDs

Implants

- Progestin only
- Under the skin of the arm
- Minor surgery
- None available now



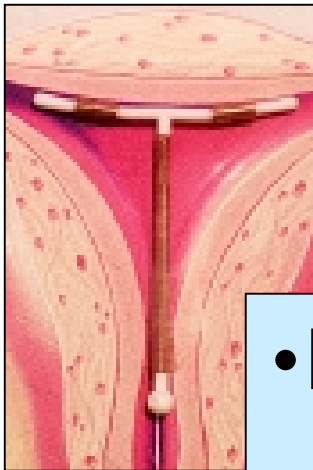
Norplant[®]
6 rods (5 years)



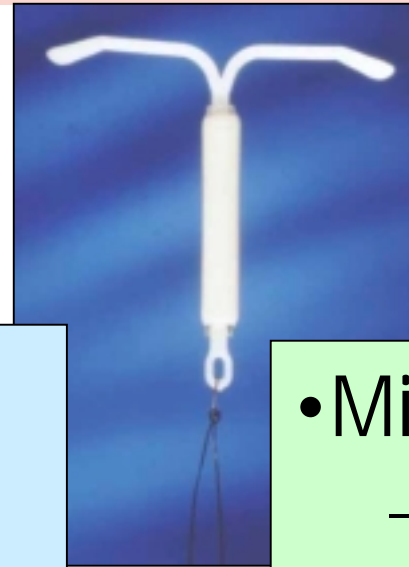
Implanon[®]
1 rod (3 years)
May be available soon

Intrauterine Device: IUD

- For women who are NOT at risk for STDs
- Prevents fertilization



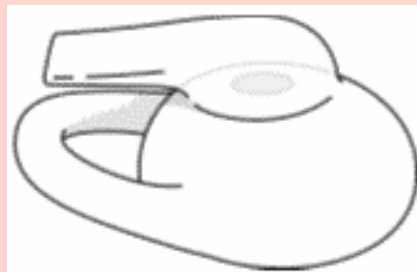
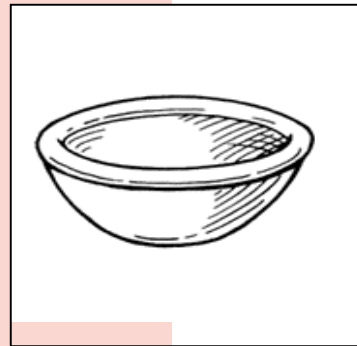
- ParaGard®
 - Copper
 - Up to 10 years



- Mirena®
 - Progestin
 - Up to 5 years

Barrier Methods

- Male condoms: most effective
- Female condom
- Diaphragm (w/ spermicide)
- Cervical caps
- (Today^R sponge)



Latex Condoms



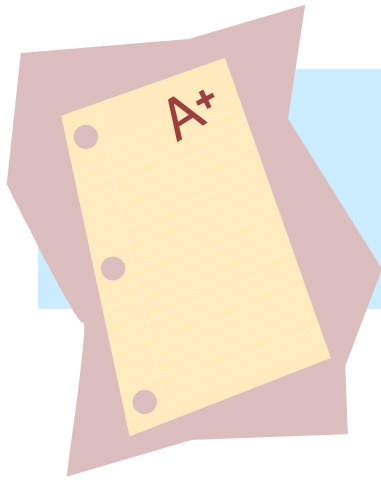
- Help prevent transmission of STDs
- Condoms reduce the risk of HIV transmission
- Good physical barrier: no “pores”
- Failure mostly due to not using them
- Can also break or slip (1-3%)



Non-Latex Condoms

- “Natural” (lamb intestine)
 - **NOT** good for STD protection
- Polyurethane Male Condoms
 - Durex Avanti®; Trojan Supra®
 - Higher breakage & pregnancy rates
 - OK for people allergic to latex
- Female Condoms
 - Polyurethane
 - Higher pregnancy rate





Using Condoms Correctly

- A new latex condom every time
- Put on with erection
- Put on before genital contact
- Leave room at tip--but no air
- Roll on "right side out"
- Ensure adequate lubrication
- Hold rim while withdrawing
- Withdraw while still erect
- No oil-based lubricants
- Careful not to damage with teeth, nails, etc.
- *Every* time!
- Store in cool dry place
- Out of direct sunlight
- Watch expiration date

Who should use Condoms?



➤ EVERYONE, unless:

- Monogamous (BOTH partners)
- No previous partners...or
- Tested negative (twice over 6 months)
- Pregnancy prevention is covered

Correctly, EVERY time!





Spermicides

- Detergent action kills sperm
- Not very effective birth control
- May INCREASE risk of HIV transmission (due to irritation of the vagina)

➡ NOT recommended for anyone at risk of STDs

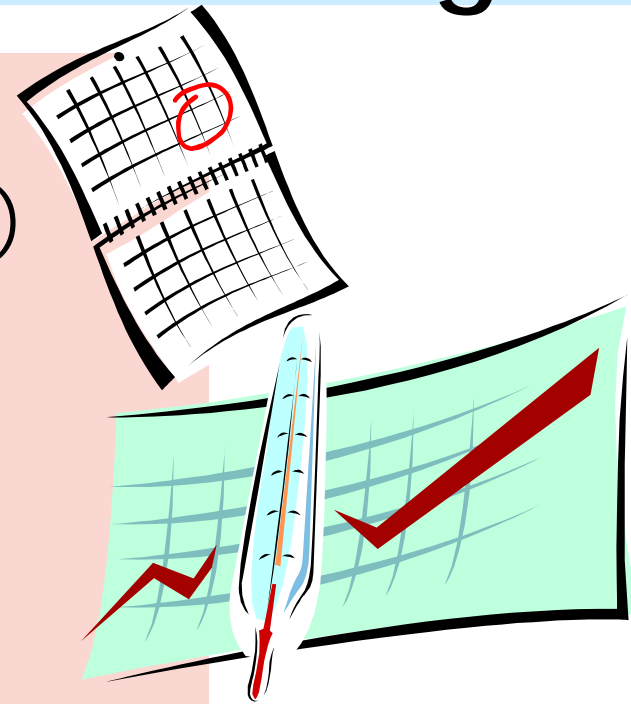


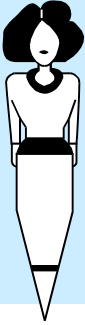
Contraceptive Sponge

- May be available again soon
- Not a very effective method
- Because it has spermicide, it may *INCREASE* HIV risk

Periodic Abstinence: Natural Family Planning

- Calendar “rhythm”
- Ovulation (cervical mucus) method
- Basal body temperature
- Combination
- Standard days method (CycleBeads)





Sterilization



- Tubal sterilization
 - Several methods

- Vasectomy
 - Office procedure

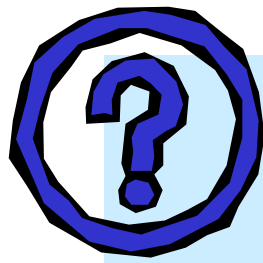


Highly effective,
but **PERMANENT**
(Irreversible)

Emergency Contraception Plan B[®]

- Within 72 (120) hours of unprotected sex
- Reduces chance of pregnancy by 75-89%
- Probably prevents ovulation, fertilization
 - Sometimes implantation?
- Does NOT cause abortion
- “Backup”, especially for condoms





How Can Pills AFTER Sex Prevent Pregnancy?



- Fertilization doesn't happen when we have sex...
- Fertilization happens when a woman ovulates
- If she has had sex within 5 days before she ovulates, she can conceive
- So... even *after* sex, there is time to prevent ovulation, or to affect sperm function

How Do I Get Birth Control?

- Free: abstinence
- Non-prescription: condoms
 - Free at Health Dept & Project WORTH clinics
- Prescription: pills, shots, patches, rings
 - Also IUDs, diaphragms, caps



How Do I Get Birth Control?

- Your doctor or clinician
- University Health System
- Project WORTH clinics (Health Department)

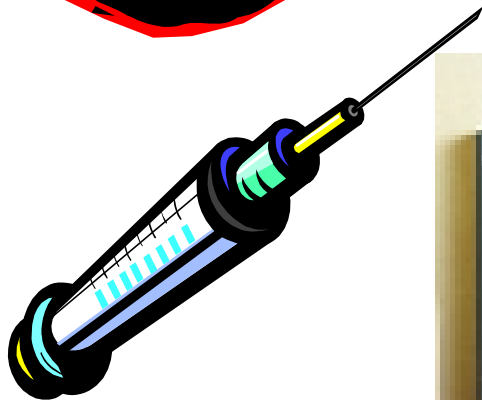
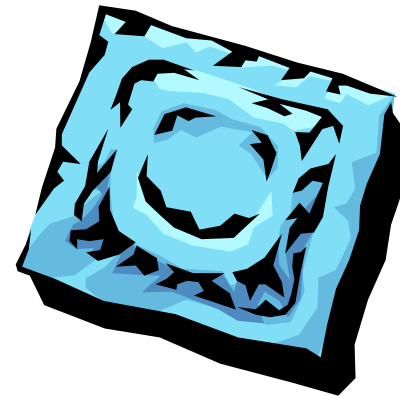


Project WORTH Clinics: **207-8850**

- Parent permission not required
- Always encouraged to talk to your parent/guardian
- Pelvic examination can often be postponed
- Usually teens are not charged



Birth Control: Important Decisions



Questions and Answers

